

012204  
16085 U.S. PTO

<b>NEW UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(only for new nonprovisional applications under 37 CFR 1.53(b))</i>		<i>Attorney Docket Number</i>	20412-08763
		<i>First Named Inventor</i>	John W. Barrus
		<i>Title</i>	System and Method for Automatic Generation of Visual Representations and Links in a Hierarchical Messaging System
		<i>Express Mail Label No.</i>	EV 333134618US

22141 U.S. PTO  
10/763602

<b>APPLICATION ELEMENTS</b>		<b>ACCOMPANYING APPLICATION PARTS</b>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		8. <input type="checkbox"/> Certified Copy of Priority Document(s) ( <i>if foreign priority is claimed</i> )	
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i>	Total Pages <b>59</b>	9. <input type="checkbox"/> Power of Attorney or Authorization of Agent	
<ul style="list-style-type: none"> <li><input type="checkbox"/> Descriptive Title of the Invention</li> <li><input type="checkbox"/> Cross Reference(s) to Related Case(s)</li> <li><input type="checkbox"/> Statement Regarding Fed sponsored R &amp; D</li> <li><input type="checkbox"/> Background of the Invention</li> <li><input type="checkbox"/> Brief Summary of the Invention</li> <li><input type="checkbox"/> Brief Description of the Drawing(s)</li> <li><input type="checkbox"/> Detailed Description</li> <li><input type="checkbox"/> Claim or Claims</li> <li><input type="checkbox"/> Abstract of the Disclosure</li> </ul>		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets <b>20</b>	11. <input type="checkbox"/> Preliminary Amendment	
5. Combined Declaration & Power of Attorney		12. <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A	
a. <input type="checkbox"/> New Declaration	Total Pages <b>3</b>	<input type="checkbox"/> Copies of IDS Citation(s)	
<ul style="list-style-type: none"> <li><input type="checkbox"/> Executed (original or copy)</li> </ul>		13. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>		14. <input checked="" type="checkbox"/> Return Postcard	
<ul style="list-style-type: none"> <li>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul>		15. <input type="checkbox"/>	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		16. <input type="checkbox"/>	
		17. <input type="checkbox"/>	
<b>ADDRESS TO:</b>			
Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-In-part (CIP) of prior application No: 09/671,505

Prior application information: Examiner: Kieu D. Vu Group/Art Unit: 2173

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 19. CORRESPONDENCE ADDRESS

**00758**

<input checked="" type="checkbox"/> Customer Number			
Name (Print/Type)	Sabra-Anne R. Truesdale	Registration No. (Attorney/Agent)	P-55,687
Signature	<i>Sabra-Anne Truesdale</i>		Date <b>1-22-04</b>

**EE TRANSMITTAL  
for FY 2004**

**Patent fees are subject to annual revision.**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 770)

<i>Complete if Known</i>	
Application Number	Not Yet Known
Filing Date	January 22, 2004
First Named Inventor	John W. Barrus
Examiner Name	Not Yet Known
Art Unit	Not Yet Known
Attorney Docket No.	20412-08763

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  Other  None  
 Deposit Account:

**Deposit Account Number**

19-2555

**Deposit Account Name**

Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application

to the above-identified deposit account.

## **FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity	Small Entity				
Fee	Fee	Fee	Fee	Description	Fee Paid
Code (\$)	Code (\$)				
1001 770	2001 385			Utility filing fee	770
1002 340	2002 170			Design filing fee	
1003 530	2003 265			Plant filing fee	
1004 770	2004 385			Reissue filing fee	
1005 180	2005 80			Provisional filing fee	
<b>SUBTOTAL (1)</b>				<b>(\$)</b>	<b>770</b>

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	Extra Claims	Fee from below	Fee Paid
Total Claims	5 -20***=0	x 18	= 00
Independent Claims	1 -3***=0	x 86	= 00
Multiple Dependent			= 00

#### **Multiple Dependent**

<u>Large Entity</u>	<u>Small Entity</u>	
<u>Fee</u>	<u>Fee</u>	<u>Fee Description</u>
<u>Code</u>	<u>Code</u>	<u>(\\$)</u>
1202	18	2202 9
		Claims in excess of 20
1201	86	2201 43
		Independent claims in excess of 3
1203	280	2203 145
		Multiple dependent claim, if not paid
1204	86	2204 43
		**Reissue independent claims over original patent
1205	18	2205 9
		**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$) 00

**\*\*or number previously paid, if greater. For Reissues, see above.**

**Reduced by Basic Filing Fee Paid**

SUBTOTAL (2) (\$).00

**SUBMITTED BY**

Name (Print/Type)	Sabra-Anne R. Truesdale	Registration No. (Attorney/Agent)	P-55,687	Telephone (650) 335-7187
Signature	<u>Sabra-Anne Truesdale</u>		Date	1-22-04